AMENDMENT TRANSMITTAL LETTER

Docket No.	SPINE 3.0-452 CONT

Application No. 10/715,965-Conf. #5392	Filing Date November 18, 2003	Examiner P. Philogene	Art Unit 3733

Applicant(s): James D. Ralph and Thomas N. Troxell

Invention: SPACER DEVICE AND INSERTION INSTRUMENT FOR USE IN ANTERIOR CERVICAL FIXATIONSURGERY

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	14	- 23 =	0	x 50.00	0.00
Independent Claims	2	- 3 =	0	x 200.00	0.00
Multiple Dependent Claims (check if applicable)			☐		
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00

[x] Large Entity   ☐ Small Entity

[x] No additional fee is required for this amendment.

☐ Please charge Deposit Account No. _____ in the amount of $ _____ .
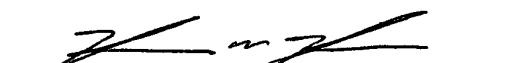A duplicate copy of this sheet is enclosed.

☐ A check in the amount of $ _____ to cover the filing fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

[x] The Director is hereby authorized to charge and credit Deposit Account No. ___12-1095___
as described below. A duplicate copy of this sheet is enclosed.

   [x] Credit any overpayment.

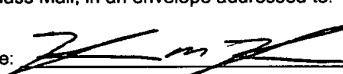   [x] Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

Dated: ___September 26, 2007___

Kevin M. Kocun
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